

**Application Data Sheet****Application Information**

Application number::

Filing Date:: 6/3/05

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title :: Rapid One-Step Method For Generation Of Antigen Loaded Dendritic  
Cell Vaccine From Precursors

Attorney Docket Number:: BHCS:1028

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 1

Total Drawing Sheets:: 19

Small Entity?:: Yes

Latin name::

Variety denomination name::

Petition included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

## **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Jacques
Middle Name::	F.
Family Name::	Banchereau
Name Suffix::	
City of Residence::	Dallas
State or Province of Residence::	TX
Country of Residence::	US
Street of mailing address::	6730 Northaven Road
City of mailing address::	Dallas
State or Province of mailing address::	TX
Country of mailing address::	US
Postal or Zip Code of mailing address::	75230

## **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Anna
Middle Name::	K.
Family Name::	Palucka
Name Suffix::	
City of Residence::	Dallas
State or Province of Residence::	TX
Country of Residence::	US
Street of mailing address::	101 North Brookside Drive
	Apt. 106
City of mailing address::	Dallas
State or Province of mailing address::	TX
Country of mailing address::	US
Postal or Zip Code of mailing address::	75214

## **Correspondence Information**

Correspondence Customer Number :: 34725

Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Phone number::

Fax Number:

E-Mail address::

<b>Representative Information</b>		
Representative Customer Number::	34725	

-OR-

<b>Representative Designation::</b>	<b>Registration Number::</b>	<b>Representative Name::</b>

<b>Domestic Priority Information</b>			
Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
<b>This Application</b>	<b>National Stage of</b>	<b>PCT/US03/38553</b>	<b>12/4/03</b>
<b>This Application</b>	<b>Non-Provisional of</b>	<b>60/430,791</b>	<b>12/4/02</b>

<b>Foreign Priority Information</b>			
Country::	Application number::	Filing Date::	Priority Claimed::

<b>Assignee Information</b>	
Assignee name::	<b>Baylor Research Institute</b>
Street of mailing address::	3434 Live Oak Street Suite 125
City of mailing address::	Dallas
State or Province of mailing address::	TX
Country of mailing address::	US
Postal or Zip Code of mailing address::	75204